
ENTRY BLANK



PLEASE TYPE OR PRINT

Entered previous May Show

☐ Ms.☒ yes☐ no☒ Mr. Artist

ROBERT

CMARIK

(Last Name Last)

Permanent

Address

4582 BERWALD

SOUTH EUCLID

Street

City

44121

Tel. (216) 382-5067

Zip

Area Code

Temporary

Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county?

CUYAHOGA

Born in Cuyahoga County

☒ Yes☐ No

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.☐ Museum should dispose of.☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Robert J. Cmarik

ENTRY BLANKS

1

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
 ☒ 4. Sculpture
 ☐ 5. Electric
 ☐ 6. Crafts

Medium or Materials *STEEL & GLASS*

Title *Robert Emank*
Untitled

Price or NFS
NFS

Insurance Value
If NFS Only
\$50.00

Size
6'x6'x6'

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame
DO NOT WRITE IN THIS SECTION <i>156-3</i> <i>31 (E.G.)</i> <i>165.1-3 (4)</i>		ACCEPTED	REJECTED
		<i>✓</i>	
		FEE PAID	BY
		<i>10/22</i>	<i>AL</i>

2

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
 ☐ 4. Sculpture
 ☐ 5. Electric
 ☒ 6. Crafts

Medium or Materials *GLASS*

Title *UNTITLED*

Price or NFS
\$50.00

Insurance Value
If NFS Only

Size
12" HIGH X 5"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition <i>CC</i>	Price Unframed	Price of Frame
DO NOT WRITE IN THIS SECTION <i>31 (E.G.)</i>		ACCEPTED	REJECTED
			<i>X</i>
		RECEIVED	BY

DO NOT DETACH

1976 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Dates for Pick-up of Objects

Museum Service Entrance

9:30 a.m. to 4:30 p.m., Monday through Saturday

Rejected Objects

November 15 through November 27

Accepted Objects

January 10 through January 15

It is understood that the Museum will have the right to dispose
for its own account any object not called for by the dates listed.

Please keep address within this box for window envelope.

Name	ROBERT J. CMARIK
Address	4582 E. BERWALD RD.
City & State	SOUTH EUCLID OHIO Zip 44121

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your
notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

RECEIVED

DO NOT DETACH



1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☒ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

STEEL + GLASS

Title

UNTITLED

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

156.1-3
31 (E.G.)
165.1-3 (4)

X

DO NOT DETACH



2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☒ 6. Crafts

Medium or Materials

GLASS

Title

UNTITLED

CC

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

31 (E.G.)
CC

X